U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

| 1. File Number U - 4/37 | 2. Fiscal Year Covered From: | |
|---|---|--|
| , , , | 1 / 1 / 2005 Through: 12 / 31 / 2005 | |
| 3. Name and address of person filing. | Name, file number, and address of labor organization. | |
| Name Stephen P Gault | Name UFCW Local 408 | |
| | Labor Organization File Number 026-087 | |
| P.O. Box, Bldg., Room No., if any | P.O. Box, Building and Room Number, if any | |
| Street 4201 Caroline St. | Street 4201 Caroline St. | |
| City Houston | City Houston | |
| State Texas ZIP Code + 4 77004-4891 | State Texas ZIP Code + 4 77004 - 4891 | |
| 5. Position in labor organization. President | | |
| A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organization. 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: | derived income or other economic benefit of ion represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. | |
| P.O. Box, Bldg., Room No., if any | 7.b. Amount. | |
| Street | | |
| City | \$0 | |
| State ZIP Code + 4 | | |
| Sign | nature | |
| 15. Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompany undersigned's knowledge and belief, true, correct, and complete. (See the see | ying documents), has been examined by the signatory and is, to the best of the | |
| Signed Signed | On 03/31/2005 713-526-5121 Telephone Number | |
| | | |

| Name of Person Filing Stephen Gault | File Number U- |
|--|---|
| B. Held an interest in or derived income or economic benefit with monetary val substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization. | wise dealing with the business vely seeking to represent, or lirectly to, or otherwise |
| 8. Name and address of Business (including trade name, if any). Name National Pacific Dental Trade Name, if any: P.O. Box, Bldg., Room No., if any Suite 500 Street 1445 North Loop West City Houston State Texas ZIP Code + 4 77008 | 9. Business deals with: X a. Labor Organization b. Trust c. Employer |
| 10, If 9.b. or 9.c. is checked give trust or employer's name. | 11.a. Nature of such dealing. |
| Name Trade Name, if any: P.O. Box, Bldg., Room No., if any | Local 408's dental company. |
| Street | 11.b. Approximate dollar value of such dealing. \$76,935 |
| State ZIP Code + 4 | 12.a. Nature of interest held or income received. Lunch meeting (9/13/05) w/NPD, Spectera (our vision co.) & Mo Hodos (Nat'l Trust Fund) on administration issues in Fund merger. Rick Tisch (NPD) paid for lunch. |
| | 12.b. Amount. \$20 |
| C. Received from any employer (other than an employer covered undo or from any labor relations consultant to an employer any payment of money | |
| 13.a. Name and address of Employer or Labor Relations Consultant | 14.a. Nature of payment. |
| (including trade name, if any). | |
| Name | |
| Trade Name, if any: | |
| P.O. Box, Bldg., Room No., if any | |
| Street | |
| City | |
| State ZIP Code + 4 | |
| 13.b. Is the Business an Employer or Consultant? | 14.b. Amount of payment. \$0 |

| Name of Person Filing Stephen Gault | File Number U- | | |
|-------------------------------------|----------------|--|--|
| Part R Continuation Page | | | |

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, setting or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or setting or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

| 8. Name and address of Business (inclu | ding trade name, if any). | 9. Business deals with: | |
|---|---------------------------|---|------------|
| Name National Pacific Denta | 1 | a. Labor Organization | |
| Trade Name, if any: | | | |
| P.O. Box, Bldg., Room No., if any 500 | | b. Trust | |
| Street 1445 North Loop West | | c. Employer | |
| City Houston | | | |
| State Texas | ZIP Code + 4 77008 | <u></u> | |
| 10. If 9.b. or 9.c. is checked give trust or en | nployer's name. | 11.a. Nature of such dealing. | |
| Name | | Local 408's dental company. | |
| P.O. Box, Bldg., Room No., if any Street City | | | |
| State | ZIP Code + 4 | 11.b. Approximate dollar value of such dealing. | \$76,935 |
| | | 12.a. Nature of interest held or income received. | |
| | | On 9/15/05 Ken Sheldon w/ NPD gave baseball tickets to Local 408 to g members. Two were given to J.D. R given to Steve Crianza. | ive out to |
| | | 12.b. Amount. | \$75 |

| Name of Person Filing Stephen Gault | | File Number U- | |
|---|---------------------------------|--|------------------------|
| Part B Continuation Page | | | |
| B. Held an interest in or derived income or economic benefit with monetary value or leasing to, or otherwise dealing with the business of an employer whose employer any part of which consists of buying from or selling or leasing directly or indirectly our labor organization is interested. | oyees your labor organization n | epresents or is actively se | eking to represent, or |
| 8. Name and address of Business (including trade name, if any). Name National Pacific Dental. Trade Name, if any: P.O. Box, Bldg., Room No., if any 500 Street 1445 North Loop West City Houston State Texas ZIP Code + 4 77008 10. If 9.b. or 9.c. is checked give trust or employer's name. Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4 | 9. Business deals with: | ling. L company. alue of such dealing. eld or income received. & Dr. Grant lunc | |
| | | | |

12.b. Amount.

\$15

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|--|---|---------------------------------------|--------------------------|
| Name of Person Filing Stephen Gault | | File Number U- | |
| Part B Conti | nuation Page | | |
| B. Held an interest in or derived income or economic benefit with monetary value or leasing to, or otherwise dealing with the business of an employer whose employ (2) any part of which consists of buying from or selling or leasing directly or indirect your labor organization is interested. | rees your labor organization re | epresents or is actively seel | king to represent, or |
| 8. Name and address of Business (including trade name, if any). | 9. Business deals with: | | |
| Name Kraft Foods, Inc. | a. Labor Organi | zation | |
| Trade Name, if any: Maxwell House Coffee | | | |
| | b. Trust | | |
| P.O. Box, Bldg., Room No., if any | | | |
| Street 3900 Harrisburg Blvd. | c. Employer | | |
| City Houston | | | |
| State Texas ZIP Code + 4 77003 | | | |
| 10. If 9.b. or 9.c. is checked give trust or employer's name. | 11.a. Nature of such dea | ling. | |
| Name | Coffee Plant Local | 408 represents. | |
| Trade Name, if any: | | | |
| P.O. Box, Bldg., Room No., if any | | | |
| Street | | | |
| City | | | |
| State ZIP Code + 4 | 11.b. Approximate dollar va | lue of such dealing. | \$76,935 |
| | 12.a. Nature of interest he | ld or income received. | |
| | On 12/8/2005 had l Miguel Lopez. Mr. | unch with new Per Lopez paid for l | sonnel Manager, unch. |

12.b. Amount.

\$15

| Name of Person Filing Stephen Gault | | File Number U- | |
|---|--|-----------------------------|------------------------|
| Part B Contin | nuation Page | | |
| B. Held an interest in or derived income or economic benefit with monetary value for leasing to, or otherwise dealing with the business of an employer whose employ (2) any part of which consists of buying from or selling or leasing directly or indirectly your labor organization is interested. | rees vour labor organization re | epresents or is actively se | eking to represent, or |
| 8. Name and address of Business (including trade name, if any). Name National Pacific Dental Trade Name, if any: P.O. Box, Bldg., Room No., if any 500 Street 1445 North Loop West City Houston State Texas ZIP Code + 4 77008 | 9. Business deals with: a. Labor Organi b. Trust c. Employer | zation | |
| 10. If 9.b. or 9.c. is checked give trust or employer's name. Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City | 11.a. Nature of such dea | - | |
| State ZIP Code + 4 | 11.b. Approximate dollar va 12.a. Nature of interest he NPD sent a Christm | ld or income received. | \$76,935 |
| | | | |

12.b. Amount.

File Number U-

\$35

| | T |
|-------------------------------------|----------------|
| Name of Person Filing Stephen Gault | File Number U- |

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

| 8. Name and address of Business (including trade name, if any). | 9. Business deals with: | |
|---|---|----------|
| Name Dennis Jenkins, CPA | a. Labor Organization | |
| Trade Name, if any: | | |
| P.O. Box, Bldg., Room No., if any Bldg 1200, Suite 1250 | b. Trust | |
| Street 1301 Shiloh Rd | c. Employer | |
| City Kennesaw | | |
| State Georgia ZIP Code + 4 30144 | | |
| 10. If 9.b. or 9.c. is checked give trust or employer's name. | 11.a. Nature of such dealing. | |
| Name | Local 408's CPA. | |
| Trade Name, if any: | | |
| P.O. Box, Bldg., Room No., if any | | |
| Street | | |
| | | |
| City | | <u> </u> |
| State ZIP Code + 4 | 11.b. Approximate dollar value of such dealing. | \$76,935 |
| | 12.a. Nature of interest held or income received. | |
| | Mr. Jenkins sent a Christmas ham. | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | 12.b. Amount | \$30 |